## **CERTIFICATE OF SERVICE**

I, Gini L. Downing	(name), certify that service of this summons and a copy of
the complaint was made February 4, 2022	(date) by:
<ul> <li>         Mail service: Regular, first class United States m         Biodelivery Sciences     </li> <li>         15 Ingram Blvd.         La Vergne, TN 37086     </li> </ul>	nail, postage fully pre-paid, addressed to:
BioDelivery Sciences International, Inc. Attn: James Vollins, General Counsel, Chief Compliance Officer, Corporate Secretary 15 Ingram Blvd. La Vergne, TN 37086	
☑Certified Mail Service: By sending the process by of the defendant at: BioDelivery Sciences International, Inc. Attn: Scott M. Plesha, President 4131 Parklake Avenue, Ste. 225 Raleigh, NC 27612-2390	certified mail addressed to the following entities/officers/registered agents
National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc. Attn: Mary Theresa E Coelho 4131 Parklake Avenue, Suite 225 Raleigh, NC 27612 I further certify that I am, and at all of age and not a party to the matter concern	times during the service of process was, not less than 18 years ing which service of process was made.
Under penalty of perjury, I declare t	hat the foregoing is true and correct.
Date February 4, 2022 Signature	/s/ Gini L. Downing
Print Name:	Gini L. Downing Pachulski Stang Ziehl & Jones LLP 10100 Santa Monica Blvd. 13 <sup>th</sup> Floor
Business Address:	Los Angeles, CA 90067

r mayerare are the	ba .	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON D	ELIVERY
Complete items 1, 2, and 3.  Print your name and address on the reverse	A. Signature	Agent Agent
so that we can return the card to you.	B. Received by (Printed Name)	C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Sus an Myco	2118/02
1. Article Addressed to:	D. Is delivery address different from If YES, enter delivery address b	item 1? ☐ Yes
BioDelivery Sciences International, Inc.	II 120, etter delivery address o	
Attn: Scott M. Plesha, President 4131 Parklake Avenue, Ste. 225		
Raleigh, NC 27612-2390		
arra varorron a mani rona a sir v i in lu lu in in si lu i i i i i i i i i i i i i i i i i i	3. Service Type	☐ Priority Mail Express®
CONTRACTOR OF THE PROPERTY OF	☐ Adult Signature ☐, Adult Signature Restricted Delivery	☐ Registered Mail TM ☐ Registered Mail Restricted
9590 9402 3367 7227 2945 72	I Colemon Ham Hoom to be a control of	Delivery Return Receipt for Merchandise
2. Article Number (Transfer from service label)	☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Signature Confirmation** ☐ Signature Confirmation
7017 2400 0000 3936 9634	Insured Mail Restricted Delivery (over \$500)	Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	A STATE OF THE STA	Iomestic Return Receipt
4	•	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON	DELIVERY
■ Complete items 1, 2, and 3.	A. Signature	DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	A. Signature	☐ Agent ☐ Addressee
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature	<b>⊟</b> Agent
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	A. Signature  A.	Addressee C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>National Registered Agents, Inc.,</li> </ul>	A. Signature  X  B. Received by (Printed Name)	Addressee C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc.</li> </ul>	A. Signature  A.	Addressee C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>National Registered Agents, Inc.,</li> </ul>	A. Signature  A.	Addressee C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc. Attn: Mary Theresa E Coelho</li> </ul>	A. Signature  A.	Addressee C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc. Attn: Mary Theresa E Coelho</li> <li>4131 Parklake Avenue, Suite 225</li> </ul>	A. Signature  A.	C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc. Attn: Mary Theresa E Coelho</li> <li>4131 Parklake Avenue, Suite 225</li> </ul>	A. Signature  B. Received by (Printed Name)  D. Is delivery address different from If YES, enter delivery address  3. Service Type  Adult Signature  Adult Signature  Adult Signature	C. Date of Delivery  The priority Mail Express®  Registered Mall <sup>TM</sup> Registered Mall Restricted
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc. Attn: Mary Theresa E Coelho</li> <li>4131 Parklake Avenue, Suite 225</li> </ul>	A. Signature  X  P. Received by (Printed Name)  D. Is delivery address different from the YES, enter delivery address address and the YES, enter delivery address and YES, enter delivery and YES, enter delivery address and YES, enter delivery	C. Date of Delivery  mitem 1? Yes below: No  Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Regelot for
Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:  National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc. Attn: Mary Theresa E Coelho 4131 Parklake Avenue, Suite 225 Raleigh, NC 27612	A. Signature  B. Received by (Printed Name)  D. Is delivery address different from If YES, enter delivery address different from If YES, enter delivery address dult Signature  Adult Signature Restricted Delivery  Certified Mail®  Certified Mail®  Collect on Delivery  Collect on Delivery Restricted Delivery	☐ Addressee  C. Date of Delivery  I D Yes  below: ☐ No  Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™
Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:  National Registered Agents, Inc., R/A BioDelivery Sciences International, Inc. Attn: Mary Theresa E Coelho 4131 Parklake Avenue, Suite 225 Raleigh, NC 27612	A. Signature  Received by (Printed Name)  D. Is delivery address different from If YES, enter delivery address dif	C. Date of Delivery  mitem 1? Yes below: No  Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Receipt for Merchandise